

# Work Order ID 110671

January-07-14 3:00:11 PM

\*110671\*

Page 1

Item ID: D2594-3 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: O-Ring  
 Start Date: 1/07/14 Start Qty: 100.00 \*100\* Cust Item ID:  
 Required Date: 1/10/14 Req'd Qty: 100.00 \*100\* Customer:  
 Reference:

Approvals: Process Plan: MP/MLJ Date: 14-01-10 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2594	Rev C								

100 PURCHASING 0.00  
 \*100\*  
 Purchasing Memo 0.00  
 Purchasing Issue P/O: 22592 Purchase as per Dwg D2594 Possible P/N: Parker  
 2-011 Material release note is required

CL 14/01/13 100

110 Receive & Inspect for Damage & Mat'l Certs 0.00  
 \*110\*  
 Packaging Memo 0.00  
 Packaging Ensure Material Release Note is attached

R 14/01/14 (100)

120 QC6- Inspect dimensions to drawing 0.00  
 \*120\*  
 QC Memo 0.00  
 Quality Control

DAS  
27  
9-89

14/1/15

100

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:15%;">Skid-tube <input type="checkbox"/></td> <td style="width:15%;">Crosstube <input type="checkbox"/></td> <td style="width:15%;">Water Jet <input type="checkbox"/></td> <td style="width:15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 110671

\*110671\*

Page 2

January-07-14 3:00:11 PM

Item ID: D2594-3 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: O-Ring  
 Start Date: 1/07/14 Start Qty: 100.00 \*100\* Cust Item ID:  
 Required Date: 1/10/14 Req'd Qty: 100.00 \*100\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>EP001</u>	0.00							
*130*									
Packaging	Memo	0.00				100x	DAS 28 9-89	14-01-15	
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
*140*									
QC	Memo	0.00							
Quality Control									

14-01-14  
14-01-16

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Doc/Data									
Equip/Tooling									
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Offset/Setup									
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# Picklist Print

January-07-14 3:00:10 PM

Page 1

Work Order ID: 110671

Parent Item: D2594-3

Parent Item Name: O-Ring

Start Date: 1/07/14

Required Date: 1/10/14

Start Qty: 100.00

Required Qty: 100.00

Comments: IPP B04.06.08Reformat; Added Powder CoatKJ/JLM  
IPP C 06.12.11 ecn 836 EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS28775-011 O-Ring		Purchased	No			100	Each	0.0000	1	100		1/4/01/14	(100)

1136 71

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Training									
Transport									
Unapproved									

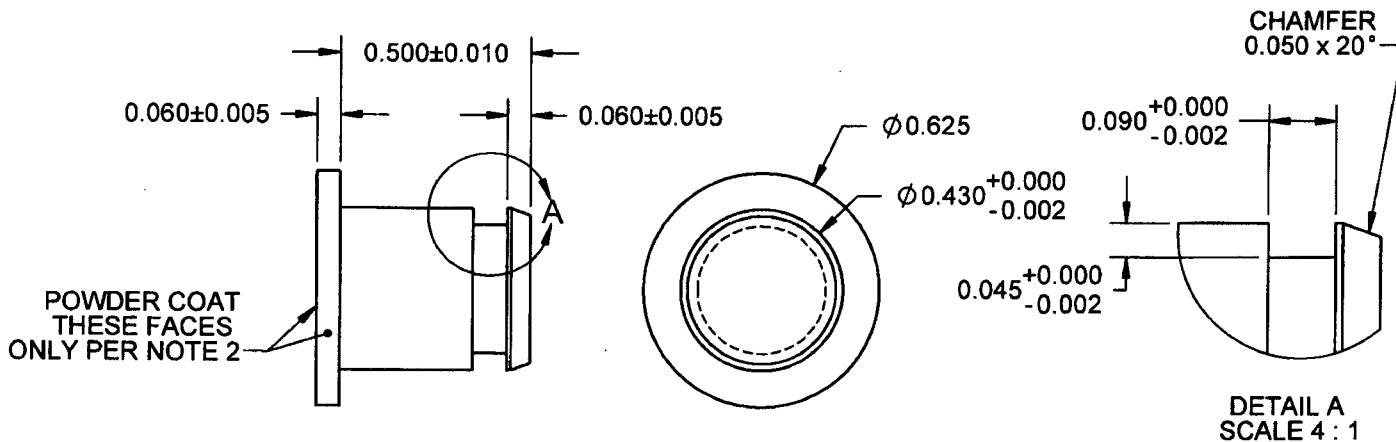
### FAULT CATEGORY

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DESIGN #	DRAWN BY CB	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
CHECKED LE	APPROVED #	DRAWING NO. <b>D2594</b>	REV. C SHEET 1 OF 1
DATE <b>06.11.20</b>		TITLE <b>PLUG</b>	SCALE 2:1
REV	DATE	DESCRIPTION	
A	96.09.16	NEW ISSUE	
B	97.03.15	ADD GROOVE AND O-RING	
C	06.11.20	ADD PWDR COAT; ADD MS P/N TO D2594-3; ADD AMS SPECS; ADD TOLERANCE NOTE	

RELEASED  
06.11.28



**D2594-1 PLUG**

**D2594-1 PLUG NOTES:**

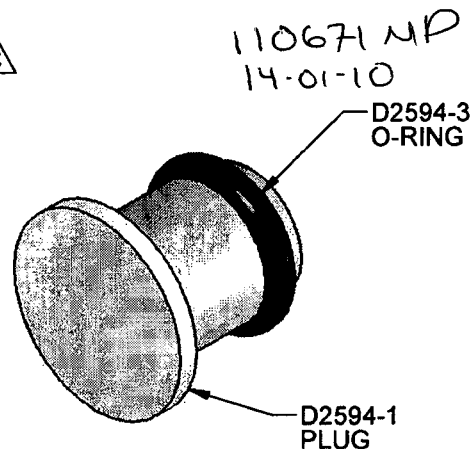
- 1) MATERIAL: ALUMINUM 5052-H32 ROUND BAR PER QQ-A-225/7 (REF DART SPEC M5052H32R) OR ALUMINUM 6061-T6/T651/T6510/T6511/T62 ROUND BAR PER QQ-A-225/8 OR QQ-A-200/8 OR AMS 4117/4128/4115/4116/4160 (REF DART SPEC M6061T6R)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT SPECIFIED FACES WHITE GLOSS (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) ALL DIMENSIONS ARE IN INCHES UNLESS OTHERWISE NOTED
- 5) BREAK ALL SHARP EDGES TO 0.010 MAX

**D2594-3 O-RING NOTES:**

- 1) 5/16 ID, 7/16 OD, 1/16 WIDTH
- 2) POSSIBLE SUPPLIER P/N: PARKER 2-011 OR MS28775-011

**PARTS LIST:**

QTY	P/N	DESCRIPTION
X	D2594	PLUG ASSEMBLY
1	D2594-1	PLUG
1	D2594-3	O-RING



**D2594 PLUG ASSEMBLY**

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DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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Doc/Data									
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Handling/Pre									
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO22592**

Purchase Order Date 1/13/2014

PO Print Date 1/13/2014

Page Number 2 of 3

**Order From :**

AVIALL  
PO BOX 842275

DALLAS, TX 75284-2275  
USA

VU-AVI003

**Ship To :** DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**Contact Name**

**Vendor Phone** 905-676-1695

**Ship To Contact**

**Ship To Phone**

**Ship Via:** FedEx PI collect

**Ship Acct:**

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #**

10127-2607

**Terms**

Net 30

**Currency**

USD

**FOB**

FCA - (Free Carrier)

**Line Total: \$14.00**

4	MS28775-008	O RING	1/14/2014 Yes 1/14/2014	100.00 Each	\$0.27	\$27.00
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AS PER DWG D2651 REV. B  
B110659

**Line Total: \$27.00**

5	MS28775-011	O-Ring	1/14/2014 Yes 1/14/2014	100.00 Each	\$0.27	\$27.00
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AS PER DWG D2594 REV. C  
B110671

**Line Total: \$27.00**

6	156005-6D0213	Hose Assembly	1/17/2014 Yes 1/17/2014	4.00 Each	\$165.17	\$660.68
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AS PER DWG D4002 REV. D  
B110995

**Note:**

1/13/2014



## INVOICE



SHIPMENT NBR:

8435663

PAGE: 2  
DATE: 01/13/14  
TIME: 20:50  
EMP#: 23370

CUSTOMER P.O.: PO22592

ORDER NUMBER: 0014322751- 8435663

ORDER DATE: 01/13/14

SHIP VIA: FED P1AM - COLLECT

ORD TYP: RG  
CURRENCY: USDB 032028  
L DART AEROSPACE LTD  
L 1270 ABERDEEN STREET  
T HAWKESBURY ON K6A 1K7  
O CANADAS  
H DART AEROSPACE LTD  
I 1270 ABERDEEN STREET  
P HAWKESBURY ON K6A 1K7  
T  
O CANADAS 08200  
H AVIALL CENTRAL WAREHOUSE  
I 2750 REGENT BLVD.  
P DFW AIRPORT TX 75261-9048  
F U.S.A.  
R  
O  
M

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY	SHIP QUANTITY	BACK ORDER	UOM	UNIT PRICE	EXTENDED UNIT PRICE
4	15	MS28775-008 ORING: NITRILE, 70 HYD Schedule B: 4016.93.0000 LOT 0114565947 EA Country of Origin: MEXICO	100	100		0 EA	.27	26.70
							Export Classification: 9A991.d	
5	15	MS28775-011 ORING: NITRILE, 70 HYD Schedule B: 4016.93.0000 LOT 1213524898 EA Country of Origin: U.S.A.	100	100		0 EA	.27	26.70
							Export Classification: 9A991.d	

\*\*\* These commodities, technologies, or software were exported from the United  
\*\*\* States in accordance with the Export Administration Regulations. Diversion  
\*\*\* contrary to U.S Law is prohibited.\*\*\*  
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## CERTIFICATE OF CONFORMANCE

It is hereby certified that Aviall Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, Mil Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at Aviall.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.

JR Hofmann, Director, Quality Assurance &amp; Training

01/13/14

Date

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL RETURNED  
MERCHANDISE SUBJECT TO HANDLING FEE.THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS  
OF THE FAIR LABOR STANDARDS ACT OF 1938 AMENDED.

CUSTOMER ORIGINAL